

PCT/PTO

16 MAY 2005

17- 8-04; 3:13PM:Competition / Racing

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# POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM

Application Number I.A. PCT/CA02/01565  
Filing Date I.A. 10/18/2002  
First Named Inventor GUAY, Estienne  
Art Unit Not Assigned  
Examiner Name Not Assigned  
Attorney Docket Number 2003012101US 2

I hereby appoint:

- ☒ Practitioners at Customer Number  
OR  
☐ Practitioner(s) named below:

28735

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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☐ Firm or  
Individual Name

Address

Address

City

State

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Telephone

Fax

I am the:

- ☒ Applicant/Inventor.

- ☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

## SIGNATURE of Applicant or Assignee of Record

Name FECTEAU, Berthold

Signature

Date

Telephone

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple

☒ Total of 04 forms are submitted.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending on the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)</b>  <input type="checkbox"/> Declaration Submitted With Initial Filing      OR <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)		Attorney Docket Number	200301210US2
		First Named Inventor	GUAY, Etienne
		COMPLETE IF KNOWN	
		Application Number	I.A. PCT/CA02/01565
		Filing Date	I.A. 10/18/2002
		Art Unit	Unknown
		Examiner Name	Unknown

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

A THREE-WHEELED VEHICLE HAVING A SPLIT RADIATOR AND AN INTERIOR STORAGE COMPARTMENT

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 10/18/2002 as United States Application Number or PCT International

Application Number PCT/CA02/01565 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application ( )	Country	Foreign Filing Date ( /DD/ )	Priority	Certified Copy Attached? ES O	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

(Page 1 of 2)

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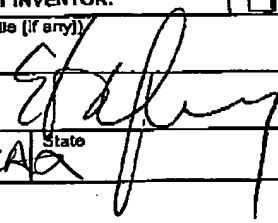
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**DECLARATION — Utility or Design Patent Application**

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Name			
Address			
City		State	ZIP
Country	Telephone	Fax	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR: <input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))		Family Name or Surname	
Eliane		GUAY	
Inventor's Signature		Date	
		12/08/04	
Residence: City	State	Country	Citizenship
Oxford	CA	Canada	Canada
Mailing Address			
4 De La Sarcelle Street			
City	State	ZIP	Country
Oxford		J0E 2L0	Canada
NAME OF SECOND INVENTOR: <input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))		Family Name or Surname	
Berthold		PECTEAU	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Richmond		Canada	Canada
Mailing Address			
105, Des Sous-Bois Street			
City	State	ZIP	Country
Richmond		J1B 2H0	Canada
<input checked="" type="checkbox"/> Additional inventors or a legal representative are being named on the (B) supplemental sheet(s) PTO/SB/02A or 021R attached hereto.			

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# 3/ 3

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Address			
City		State	ZIP
Country	Telephone	Fax	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Edenne		GUAY	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Oxford		Canada	Canada
Mailing Address 4 De La Sordelle Street			
City	State	ZIP	Country
Oxford		JOE 2L0	Canada
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Berthold		PECTEAU	
Inventor's Signature		Date	
<i>Berthold Pecteau</i>		2004/08/17	
Residence: City	State	Country	Citizenship
Richmond	CAN	Canada	Canada
Mailing Address 105, Des Sous-Bois Street			
City	State	ZIP	Country
Richmond		J1B 2H0	Canada
<input checked="" type="checkbox"/> Additional inventors or a legal representative are being named on the <u>2</u> supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.			

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PTO/SB/02A (08-03)

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<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR(S)</b> Supplemental Sheet Page 1 of 1
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<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Martin		AUBE	
Inventor's Signature <i>[Signature]</i>		Date <i>AUGUST 20th 2004</i>	
Residence: City	State	Country	Citizenship
St-Bruno	CAX	Canada	Canada
Mailing Address 1800 Benoit Street			
Mailing Address St-Bruno			
City	State	Zip	Country
St-Bruno		J3V 6N5	Canada
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Bruno		GIRQUARD	
Inventor's Signature <i>[Signature]</i>		Date	
Residence: City	State	Country	Citizenship
Montreal		Canada	Canada
Mailing Address 4530 South Clark, Apt. 504			
Mailing Address Montreal			
City	State	Zip	Country
Montreal		H2T 2T4	Canada
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	Zip	Country

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<b>DECLARATION</b>		<b>ADDITIONAL INVENTOR(S)</b> Supplemental Sheet	
		Page <u>1</u> of <u>1</u>	

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Martin		AUBG	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
1800 Benedict Street		Canada	Canada
Mailing Address			
Mailing Address			
City	State	Zip	Country
St-Bruno		J3V 4N5	Canada

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Bruno		GROUARD	
Inventor's Signature		Date	
		18/08/2004	
Residence: City	State	Country	Citizenship
4530 South Clark, Apt. 504		Canada	Canada
Mailing Address			
Mailing Address			
City	State	Zip	Country
Montreal		H2T 2T4	Canada

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	Zip	Country

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